Cheryl Christiansen
City Clerk
Lucille Taylor
Deputy Clerk



Phone (518) 279-7134 Fax (518) 270-4639

Office of the City Clerk

LANDLORD PERMISSION FORM

I,	,
owner of	, Troy, NY,
hereby give permission as landlord to my tenant,	
of said address, to keep dog(s) at said address.	
Landlord's signature:	
Notarization:	
I DE 1 1 2011	
LPF 1-1-2011	